

APPLICATION DATA SHEET

Application Information

Application Type::	Regular
Subject Matter::	Utility
CD-ROM or CD-R?::	No
Number of CD Disks::	
Number of Copies of CDs::	
Sequence Submission?::	
Computer Readable Form (CRF)?::	
Number of Copies of CRF::	
Title::	System for Identifying, Displaying, Marking, and Treating Suspect Regions of Tissue
Attorney Docket Number::	MDS-037
Request for Early Publication?::	No
Request for Non-Publication?::	
Suggested Drawing Figure::	
Total Drawing Sheets::	
Small Entity?::	Yes
Licensed US Govt. Agency::	No
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	USA
Status::	Full Capacity
Given Name::	Ross
Middle Name::	F.
Family Name::	Flewelling
Name Suffix::	

City of Residence:: Chelmsford
State or Province of Residence:: MA
Country of Residence:: USA
Street of Mailing Address:: 1 Eagle Cliff Road
City of Mailing Address:: Chelmsford
State or Province of Mailing Address:: MA
Country of Mailing Address:: USA
Postal or Zip Code of Mailing Address:: 01824

Applicant Authority Type:: Inventor
Primary Citizenship Country:: USA
Status:: Full Capacity
Given Name:: Christopher
Middle Name:: E.
Family Name:: Griffin
Name Suffix::
City of Residence:: West Groton
State or Province of Residence:: MA
Country of Residence:: USA
Street of Mailing Address:: P.O. Box 284
City of Mailing Address:: West Groton
State or Province of Mailing Address:: MA
Country of Mailing Address:: USA
Postal or Zip Code of Mailing Address:: 01472

Applicant Authority Type:: Inventor
Primary Citizenship Country:: China
Status:: Full Capacity
Given Name:: Chunsheng
Middle Name::
Family Name:: Jiang

Name Suffix::
City of Residence:: Reading
State or Province of Residence:: MA
Country of Residence:: USA
Street of Mailing Address:: 28 Benton Circle
City of Mailing Address:: Reading
State or Province of Mailing Address:: MA
Country of Mailing Address:: USA
Postal or Zip Code of Mailing Address:: 01867

Applicant Authority Type:: Inventor
Primary Citizenship Country:: France/USA
Status:: Full Capacity
Given Name:: Jean-Pierre
Middle Name::
Family Name:: Schott
Name Suffix::
City of Residence:: Weston
State or Province of Residence:: MA
Country of Residence:: USA
Street of Mailing Address:: 8 Greenridge Road
City of Mailing Address:: Weston
State or Province of Mailing Address:: MA
Country of Mailing Address:: USA
Postal or Zip Code of Mailing Address:: 02493

Applicant Authority Type:: Inventor
Primary Citizenship Country:: USA
Status:: Full Capacity
Given Name:: Kevin
Middle Name:: T.
Family Name:: Schomacker

Name Suffix::

City of Residence:: Maynard

State or Province of Residence:: MA

Country of Residence:: USA

Street of Mailing Address:: 6 George Road

City of Mailing Address:: Maynard

State or Province of Mailing Address:: MA

Country of Mailing Address:: USA

Postal or Zip Code of Mailing Address:: 01754

Correspondence Information

Correspondence Customer Number:: 051414

Representative Information

Representative Customer Number:: 051414

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/US2004/011820	04/16/04
PCT/US2004/011820	Claims priority to	10/418,902	04/18/03
PCT/US2004/011820	Claims priority to	60/560,384	04/07/04
This application	Claims priority to	10/418,902	04/18/03
This application	An application claiming the benefit under 35 USC 119(e)	60/560,384	04/07/04

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee Name:: MediSpectra, Inc.

City of Mailing Address:: Lexington

State or Province of Mailing Address:: MA

Country of Mailing Address:: USA